

Dr M<sup>r</sup> Cullen  
Inflammation

We always find Inflammation in one of the three stages,  
1<sup>st</sup> Adhesive, which is the most favourable, and known by the  
itching and no fever. Should this go further, we have  
2<sup>nd</sup> Suppurative, known by the severe throbbing pain, and the  
condition is considerably affected, for (which is a peculiar mark)  
fluid eminated from the blood vessels of a straw yellow colour  
full of globules, if the emination be weak we have a serous fluid  
if strong a dark blood-like fluid thrown out. — And then  
3<sup>d</sup> The ulcerative stage — "

Inflammation terminates by Resolution, Suppuration & Gangrene  
The best to treat it by Poultices, bleeding purging, low diet, <sup>then stimulate</sup> but  
rather stimulate if you wish suppuration to come on

Monday 14th Nov - 1825

Scofulous abscesses to be opened by carrying the lancet some  
way under the skin and little to be evacuated at a time, not  
allow the abscess to be exposed to the air, but poultice  
abscess of the thigh known by the fluctuation of pus; open poultice  
the opening over a wet bladage.

Tuesday 15th

It is probable that all abscesses that open into the abdomen  
always open by sloughing or a process of mortification and not by  
Suppuration.

The next kind of abscess are blood abscesses to be treated as before.  
The abscesses that occur on the head of new born infants which sometimes  
produces a caries of the bone or dura mater to be treated by dissection  
or as before mentioned in other abscesses — not to be confounded with  
lunula cerebri.

Sub-cutaneous abscesses often considered scrofulous treated as above.  
Whitlow abscess of the hand the hand to be kept at rest as above —  
also known by the bulgy appearance of the back of the hand.

Thursday 16th Friday 17th

Mammary abscesses apply emollient ointments, and not the cold  
applications, blood letting generally, saline purgatives, keep the breast elevated  
and lie on the opposite side — terminate by Resolution or Suppuration  
to be opened in the most pending situation as above, then poultice the  
If fistula causes perhaps by frequent irritation of an abscess, stimulants  
are to be applied, a corrosive sub-lime or 3 grs to the Ouncie or Sulphuric Copper  
or Selen, to be passed through the opening and stimulants introduced into it  
of sinuses also of abscesses require counter opening and require pressure and  
some stimulant — or apply introduce a silver probe immersed in Nitric  
acid — Antisept or Carbuncles known by great pain of a burning kind  
and a hot red surface — the condition is affected — treated by Antisept  
and a hot red surface — the condition is affected — treated by Antisept

L. M. Chilan Thursday 17<sup>th</sup>

2

Anthrax always to be treated according to circumstances & And  
should it be necessary treat as in Syphoid.

Fri day 18

Erysipelas a cutaneous inflammation confined to surface of the skin,  
the remedies, to be directed to Stomach, 1<sup>st</sup> An. Emetic or Sust. Ant.  
With Epsom Salt at the same time or immediately followed  
treated locally by floss or powder of different kinds and kept  
moderately cool — The Phlegmonous Erysipelas with  
fever more considerable and the skin thickened, the worse soon  
have been contained the fluid to evacuate — The Constipated  
treatment the most important, by the Antiphlogistic treatment  
we expect the greatest advantage — depletion to be practiced —  
poultice may do good in some cases — Warty solution <sup>of opium</sup> with lead  
a very good lotion, not to become dry — the strong Mucilage Plaster  
or Lead, sometimes very useful — Blisters just above the  
erysipelas part — the Corrosive Sublimate sometimes useful —  
Edematous Erysipelas common to enfeebled constitutions, any  
inflammation may substance may produce gangrene, not debili-  
tate the constitution.

Monday 21<sup>st</sup>

Mortification of Dry or Chronic and acute or moist — Of the  
result of Inflammation — And those which are not connected with  
inflammation — Of that which originates of Inflammation and it does  
sometimes originate from a healthy inflammation — Cause by too much  
stimulation from the inflammation — to be treated by lowering the action  
but not much to be done unless soothing pain and hastening sloughing  
by which the living parts take on the action of suppuration  
and ulceration but not frequent — The muculus, & Anthrax  
always terminate in mortification — Erysipelas not often — Con-  
stitutional irritability are favourable to Mortification —  
Sometimes occurs Constitutionally and other times locally and this  
always favourable if proper treatment be applied, not an Antiphlo-  
gistic practice to be applied especially in Cases of Ulcers — but tonic  
and stimulating Antisporomodics as Wine whey Rotten Egg &c  
and fermenting poultice Yeast Rye flour and Honey sometimes a  
little warm water — sometimes little Spt Wine or Camphor to be added  
(either the bark or charcoal poultice) the above to every kind of Mor-  
tification — a burns and cold sometimes induce this kind  
of Mortification especially if the natural temperature be too sedentary  
indeed whether induce the circulation in the part too soon — Spt  
Camphor and Charcoal to burns off of Turpentine — Those that  
do not result from inflammation as pressure or ligature or suffoca-  
tion of an artery in old age — two sort of the same kind, & in this no  
pain to be known by discolouration of the part and not returning the natural  
color soon after removing the pressure &c in those cases prevent pressure  
on those parts, apply the Spt Minervi — Spt Camphor & Charcoal  
after while apply an adhesive plaster — from ligature, this seldom  
causes health consultation —

More of exterior articular there is little chance of cure - Dr. H. C. Allen 3  
such as Potts Mortification of the toes &c, depend on an infarcted circulation  
treat by supporting the sys in some way Opium alone or combined with Paris  
Camphor, volatile alkali & Opium in a solid form - Locally apply nobilizer  
and apply very little - Little to be done in Constitution modification  
perhaps induced by some Cornutter used in Rye bread

Wednesday 22<sup>nd</sup>

Of Scrofula, The predisposition, are the complexion, eyes &c But  
a relaxed state of the solids is the cause of Scrofula - the want of  
tame, also - they are unable to bear so much labour or fatigue, the  
cellular tissue also is very relaxed and easily produce discoloura-  
tion from a slight blow &c - Some also suppose the fluid  
likewise to be deficient in their Constituent - Scrofula, Heredi-  
tary and Acquired - Bringing up children in an impoverished &  
dirty manner and keeping the children very low will induce the  
disease - And debilitate cellular tissue and the digestive organs, it  
does not belong to the sympathetic as some say but the solids and fluids  
diet. Phairaceous diet - no hot bread - no shortening - arrow root Sago &  
Milk &c - laxatives not purgatives - Blue will 4 to 5 grs combined  
1 or 2 grs Spicae as an alternative occasionally a laxative of Rhei  
et Magnesia, Cal - Or Senna & Manna th. horoway seed - also the  
aloes will affect the skin &c

Local symptoms is first manifested in the Glands, often in the  
bone-fibre, ligament tendon &c It first commences in the mesenteric  
glands, known by enlargement &c - Therefore in the commencement is  
not inflammation - the inside of a cheese-like substance, and  
then a cold-like abcess - To be distinguished from Worms but the  
treatment much the same, but ~~do not~~ -  
Scrofula of the sympathetic Glands, not peculiar to this system;  
no inflammation at first, but afterwards inflammation from pressure or other  
causes, the system becomes irritated and sometimes produce, Feculent  
fins - Curded like matter floating in fluids not always present -  
Treatment, Constitutional treatment as above, not poultices only when  
there is inflammation, generally stimulating plasters or fomentations  
are to be applied -

Thursday -

They occur, under the peritoneal surface of the thorax and abdo-  
men; this may be Constitutional Scrofula and never develop itself  
for a whole life or result in Consumption - tumors become  
abcesses in the lungs, or cavity of Stomachia and is thrown up &  
obstruction, sometimes close and do not effect the Constitu-  
tion but not by granulation, but by ligamentous substance or abscess  
or sinuses and causes the cough which often last for life; to be treated  
as in Scrofula obiectic - this causes Empyema perhaps de-  
veloped in the Serosa, and Lungual membranes, should the  
empyema be ruptured it may be fatal

Inflammation of the Scrofula is primary & initial. While swelling is  
primary Scrofula, but not to be confounded with the inflammation.  
Treated occasionally alteratives purges, not much blood letting,  
unless few cases according to inflammation.

Scrofula of the bones, generally all affected more or less, and be-  
come up solid and cause distortion &c - of the spine & limbs  
due to be treated as such - no depletion - generally as above  
by alterative, give tone to the system &c.

Where no caries or inflammation attends; but distortion of bones  
do not confine the patient by stairs &c and

Where there is Caries of any one bone, confine the patient &c  
to remove the inflammatory action excite ulceration or do it chemically  
Supply some diluted Nitric Acid &c - - it affects the eyes and  
every other portion of the body - Treated by Constitutional alteratives.

When Tubercle fever takes place from Scrofula, seldom takes place  
before the above different opinion whether before or afterwards, re-  
sults from irritation from inflammation, different kinds in different cases.

2 Kinds, one of Scrofula known by well marked priotary diarrhoea  
at the end and copious night sweat, the other inflammatory not  
so <sup>pure</sup> ~~pure~~ not the same <sup>as</sup> to kind of Antiphlogistic treatment will be borne  
in the Scrofulous kind - Patients in Scrofulous Tubercle fever which  
they believe so ill as they really are - The treatment in the very  
commencement by Proper nutritious diet as much as he can digest  
state of the System to govern the exercise-free speech of air what the person  
shall be dressed, no disease require so much change of clothes -

Few medicines can be of use Antimonials to be given small quantity  
as Camphor, Tartar emetic in a pint of water to be drunk in  
meals occasionally as an alterative not to have any immediate  
dissipation or effect if to lay it aside - never be satisfied with relief  
from the disease - The flesh of <sup>young</sup> animals to be avoided choose  
the white meat &c -

Local remedies best red hot iron  
to Scrofula of the spinal and bone - Next the Macula of the French  
must tissue or Seton - Practices to keep up the discharge and  
cleanliness - no relief from internal remedies unless they be  
alteratives - Alteratives are Gold, Mercury, Arsenic, Silver &c &c  
quick Medicines act by their alterative effects.

Dr. McClellan

Monday, Oct 28<sup>th</sup>

Of the Curved Spine, which of different kind - 1<sup>st</sup> Curved Spine, 2<sup>nd</sup> Canes of the Spine where we always have Hectic fever and the distortion always confined to one place, different in the Curved spine where there is a displacement of a great number of the Vertebrae, Curved is known by there being no pain, but much pain in case of Canes, and always so may be known by this — In the Curved sometimes you have a tiresome pain somewhat peculiar to this curved species and almost always common to the female as a chronic disease.

The Curved spine caused by bad diet - confinement &c often it does not affect the general health - treated as before by the mild laxatives - Alteratives, gentle exercise - Tonics, the Scrofulous diet in proportion to the state of the digestive organs &c

Position of the body, no confinement, or Machinery to be used -

Exercise, nearly as possible in the erect Position to move about as great a length of time as possible, and lie down a short time several times a day merely to refresh them self, horseback, carriage riding, And any exercise that will the body most into action is best — When it is of long standing no cure - Only when it is recent and owing to an affection of the general system, and this alone by giving tone to the muscles, And using friction of Salt on a towel, this the patient to do herself —

Of the Canes spine or broken back, Caused by a chronic kind of Inflammation, perhaps always from Scrofula, Scrofulous and always evacuated at some time or other from the Ulcers attending, Hectic fever always occurs when the ulcer is opened and sometimes even before this is the case, but not all cases of Canes of the spine are attended by Hectic fever and there are the only case, that may be cured — Treated in addition to the general treatment the local one is - 1<sup>st</sup> Rest in the <sup>posture</sup> recumbent & this however only in case of Canes - 2<sup>nd</sup> Relieve the Chronic inflammation by cups to be repeated as often as pain returns, after relieving pain supply issued either Camphor or the Counter for perhaps best Mopsha or Counter this last where you cannot frequently reduce Inflammation —

Serofula of the Joints or white Swelling, also of Necrosis  
may be mistaken for Rheumatism - Treated generally as before  
if it be the joint then must be set by using a splint - Also  
by Alteratives after Cuppings, And all Treatment as before  
or as in Scrofula generally. —

Yester Day at ten '29<sup>th</sup>.

Syphilis; divided into, True or Hunter's or Mercury most susceptible  
in this - This of different symptom Primary & Secondary - Primary  
symptoms affects some part of genital or even other places, this symptom  
is an Ulcer - of two kind the one on the Gland <sup>on the initial pruritus</sup> ~~Pruritus~~ peculiar  
on account of its hardness and surrounded by indurations while there  
is not much inflammation - Not painful do not discharge pus -

When the indolent appearance goes away we may expect something  
favourable and this is the best time chance -

When the Ulcer be on the left it is ~~different~~ <sup>the same</sup> - and unhealthy  
discharges of pus volvother has the same on the Scrotum and dorsum of  
feuis -

Next to these Ulcers we have bubos in the Lym-  
phatics; caused by Lymphatic or by the fluid, being in the course of the  
veins from the Cancer - One gland only swells in the true  
Ulcer or will be caused by Mercury, - it is an indolent disease -

Bubo of true Syphilis has a dull aching pain and constant  
the gland increases constantly until it breaks -

Of the Secondary symptoms, are an Ulcer in the throat, blotches on  
the skin of a copper colour these are the first order - The second  
order are the affection of the bones along the shaft of some  
one of the long bone under the Perosteum the occur in  
the form of lumps, sometime affect the bones of the head &  
never the joints - There are cancer Nodules - -

Treatment different in the different symptoms, - Primary chance  
1st By light topical cleansing plasters, Mercury in small quantities not  
to effect the system but the best to remove the existing symptoms, some  
alterative in small quantities and other large - When there no Serofula  
and no irritation of the system give XV grs of Calomel 3 or 4 times at bed  
time and you have a large secretion of every part of the system. Mer-  
cury acts upon the Capillaries & never cure induces a different condi-  
tion of the system - Warming the part 3 or 4 times <sup>day</sup> & cover it by a  
plaster of common Beeswax, if it does well continue the mercury -  
Avoid Cold or Cold water & the alternative course to be pursued  
in feeble or Serofulous persons by grs 1100m Calomel with Alterative as before  
with a wash of Sulph. Zinc. but do not produce inflammation of the skin

Not always necessary to use Mercury but may be taken by the Knipp or Capstic in small Chancery only as use local applications to remove the Chancre.

For the true Bubo Mercury by friction not so far as produce salivation, it will be of service in 3 or 4 times — If friction will not do we depend upon internal affects by Mercury taken to purge — The limb to be kept at rest and the glands not to be irritated — If much pain, Leech, then a blister to be applied, after this a camphorated plaster — If suppuration has commenced we may do well by this treatment but must be opened by a large and free incision —

Treatment of second-day symptoms, very easily done by Mercury if it be a true venereal Ulcer; And no inflammation in this Ulcer with a white pulpy surface, no pain in Swallowing in this Ulcer — The blisters large, oblong, discoloured deeply, and finally ulcerate — The use of Sarsaparilla given with blue pills of which 3 or 4 grs daily, free drinks of different teas, — a fat diet — generally cured in 2 weeks that is the last symptom — Discrimination the grand part

Off the bones cured slowly and only by a chronic course by Mercury in small doses of corrosive Subl. with <sup>some</sup> haemato elutina affection of the bones, known by the nocturnal pain, it may not however happen flowers powders at bed time Corrosive Subl 1/2 grs Elutina griss three or four times a day — with plenty of drink to keep up a constant insensible diaphoresis, sometime, we must cover the Nodes by blisters and relieve nocturnal pain

Thursday Dec 1<sup>st</sup>

Syphilis, the secondary symptoms are as liable to happen to the Antecedents as the true Syphilis

Syphilis of the Antice Kind called by Barwick the Scaly Syphilis

The Pustular venereal disease is the disease where the secondary symptoms are of a Pustular kind —

The primary symptoms are Ulcer in same situation as the true kind but of different from chancre because they are soft instead of induration of their base and ~~the~~ the edges not elevated — These ulcers are more irritable than chancre or are more sore, inflammation more common to this than to the chancre you may sometimes have common ulcers and then no constitutional affections —

Bubs more likely to occur in this than the true kind and are perhaps synothenetic of the Ulcer, the Bubs not confined to one gland only sometimes on one side or on both

May suppurate or be disceded - they break out in about the same time as before - The throat and skin break out in sores, but instead of the copper colour, we have small pustules or blisters, the throat sore and a difficulty of swallowing contrary to the true syphilis.

Last order of symptoms are no Nodes no nocturnal pains, they affect the Periosteum and not the bones as before, the constitutional affections not so severe, if no remedies used the disease would probable terminate favourable in 2 or 3 months and therefore a very mild disease and do not use too severe remedies Mercury not to be used in this disease, at least very rarely. It may be cured without Mercury.

Treatment, the primary ulcers to be cured by local remedies, perhaps bleed and cleanse the alimentary - If we doubt the kind of the disease use the yellow or Black lead - the best Sulph of Copper 5-10 to 15 gr to 3ʒ or Sulph Zinc not to be used while there is inflammation not induce it by their washes, use them once a day - When the ulcer cannot be covered by the puerpera we must use some plaster or salve, use not irritating plasters where there is inflammation use common Lecate, if no inflammation the red Precip of Bubo to be treated as common glandular affection Mercury of no use but may do harm occasionally may do good, part to be kept at rest, use leeches, blood letting, and daily purgatives not to sit at but confined to his back, do not use Blister, until the inflammation shall have been subdued - always keep on a large Poultice and may be disceded in 4 or 5 weeks, the matter from a bubo is very innocent and not poisonous.

Secondary symptoms cured easily by some Antimonials and Sarsaparilla attending to diet, clothing &c to keep up a gentle diaphoresis will generally be all that is required.

In affection of the bones to be cured by Depletion & generally of a Rheumatic kind of pain &c

The Papillary venereal disease - known by a discharge from the penis or as it is called Gonorrhœa we have in this disease secondary symptoms similar to those before secondary symptoms as the last - no ulcer in the throat but inflammation - the second day to be treated as before cure the sore on the ulcer by washing with soap and water no delving - The discharge uncertain how soon may be cured

Dr. W. Bellan

Friday Dec 2<sup>nd</sup>

Gonorrhœa such as break out in a day or two after exposure we may expect a tolerable easy cure - but when it shall not break out before 4 or 5 weeks do not expect a cure ~~too~~ soon — The matter of this disease is infectious — The Gonorrhœa virilenta when it commences goes on rapidly, but the simple Gonorrhœa goes on more slowly —

Gonorrhœa virilenta infectious in this always as home, in the early stages <sup>same</sup> may be said of Copaiva and other stimulants.

Treatment, for the first 8 or 10 day are simple unctuous and cleanse the bowels, by this time you will know of what kind it is — If it be gonorrhœa virilenta local remedies of no use at all — When the Glands in the Urethra shall enlarge you may know it to be virilenta — In both cases always bleed and reduce inflammation by cold water & the test penis kept erect — give laxatives, mucilaginous diet and drink if of a simple kind you have nearly cured the disease — but on the contra if of the virilenta — In simple enjoy rest, abstinence of animal food no stimulants, laxatives, these are sufficient until the latter end of the disease

Of the simple kind, treatment, <sup>are</sup> ~~of the Stimulants and Astringents~~ <sup>diuretics</sup> — the infectious perhaps the best, of an slight affilucent kind the very best — the sugar of Lead very injurious as an injection unless 5 or 6 grs of this with the same quantity of Sulph of Zinc to an Ounce — the next best is the Sulf of Zinc 2 or 3 grs to an Ounce after at first and increase to perhaps 10 or 12 — the Sulf Copper very good but must be much weaker — Oil of Vitriol very good after inflammation One drop to an Ounce of Water, after trying the above, sometimes infections do not answer and then diuretics As Bals. bobaiva either pure or in combination if pure 20 or 30 drops 3 times a day — Continue the infections or diuretics after the disease appears to be stopped — You may use the Bals of Canada or Spt Turpentine — You may also use common Rosin — Also direct the patient to walk some time after you discharge him —

In Gonorrhœa vinclata, first check inflammation before you continue to treat for the last stage, if it should be 5 or 6 weeks from the commencement and after this is accomplished — you may treat as in the simple Gonorrhœa, mentioned before &c but if you treat too soon with蹲提es &c you may produce a troublesome glut &c —

Hæmorrhœa The testicles or testicles enlarged may become swollen or cold if the swelling be in Gonorrhœa, use rest, blood letting by leeches, elevate the scrotum — Emollient fomentations or poultices to reduce pain and swelling and generally cures it in a few days —

Hæmorrhoids do not require severe cathartics in the last stage, but light laxatives, as Magnesia the very best in all diseases of the organs —

Enlarged Glands under the Urethra often ~~suppose~~ suppurate in Gonorrhœa vinclata you must use Mercury largely, sometimes there will an opening into the Urethra by which the urine passes out &c — Locally apply Mercury — at the same time a large laizie

Monday Dec 5<sup>th</sup>

Phagedenies, the symptoms of two kinds, the <sup>lymphatic</sup> secondary do not invariably occur with a bulb invovring, the worst kind and most fatal, begins in various, the worst begins in a sloughing ulcer — sometimes by a slow Phagedenous Ulcer and is very liable to be mistaken for syphilis of a different kind — the generally affect the Surface Mucous — of 3 kinds of property, the last kind appears as if it was erating at one end and procreasing at the other end of the Ulcer — The first <sup>or sloughing</sup> begins male and extends very fast whether on the glands penis or prepuce, and destroys it — 1st reduce the symptoms of inflammation by bleeding, part, kept cold, bowels evacuated — Next apply the undiluted Nitric Acid or some active caustic and check mortification, surround the edge of the Ulcer by Lusiticon Ointment, with a piece of lint immersed in Nitric Acid and apply it carefully — Afterward apply a poultice the same mode may be pursued in the other two kinds of this disease, as before reduce first inflammation by Antiphlogistics and afterwards apply the Nitric acid and you generally have a cure in the

first symptoms, Of the Secondary symptoms, bubo in several Glands,  
treated as before, the tobacco ointment also to be used with the best  
effects in the bubos — Mercury may be used in some circumstances —  
Secondary form-s, the throat the first affected Skin bones affections  
does not often happen in the throat if it does occur may do good by blister  
and Mortifica and air before — The fumigation of Mercury for the affection  
of the Skin and throat — Skin affected in the form of tubercles or blotches  
and break out and increase sometimes we have Phagedenic  
Ulcers after the tubercles with a long train of anomalous symptoms  
with the affection of the bones and the periosteum is enlarged, the bone,  
likely to become carious treated by  $\frac{1}{5}$  gr of Muriate of Soda with 203 gr  
of bicarbonate 3 times a day, ulcer by a poultice of Carot Kept a cut &c  
with burning the Phagedenic Ulcer &c

Tuesday Dec 6<sup>th</sup>

Anomalous diseases of the head eye, nose &c many months or years  
after Syphilis, no one medicine can be considered as specific  
Sulphur solution for thickening of the membrane of the nose & nose  
nic good generally in their anomalous appearance also the tan  
expatilla; with gr; boronine sublimate to a pint of sacaparilla  
wine glass full 3 times a day &c

Thursday Dec 8<sup>th</sup>

Of Wounds of Lacerated - Contused and Gun shot - Incised, punctured — Incised wound by division by a sharp instrument and easily heal-  
Lacerated next easy to cure and treated as incised — Contused, bruised dif-  
ficult require suppuration before healing <sup>because they bleed</sup> — Puncture generally produce  
deep seated inflammation and an abscess is formed, constitutional ir-  
ritation very apt to occur of the nerves and cellular tissue and allow air into  
them — Gun shot wound often have foreign bodies lodged in them  
also much sloughing from the parieties of the coats of the ball — Union  
in first intention by Mr Hunter, done by adhesive inflammation Dr. W. Blodell  
needles to be used in levada of the face eye lies &c, Sutups to be used as may  
be best &c On the act of dressing incised wounds, in stitching begin the angles  
and not too tight — and make the interrupted suture — not cover the suture  
by the sticks — Treat lacerated wounds as incised overlie by poultices  
contoured by poultices

Friday Dec 9<sup>th</sup>

Punctured Wounds, always very like to occur from this kind of wounds to avoid this disrupt the tumour no incision required immediately - It leaves the cellular tissue exposed and therefore carterise the punctured part - as Lunar caustis — after punctured wounds purgative emetics inflammation is of an Itanic kind treat by stimulants and purgatives daily as Seneca & Manna stimulants - Camphorates, Wine Rx -

In deep seated punctures apply lead water with Poultices especially with Antiphlogistics - where foreign bodies are carried in, then will be an abscess  
Gun shot Wounds - no dilatation required - balls &c will generally be dislodged of by poultices and by other general principles, by bleeding, purging, diuretics, unless it be in some vital part

Monday Dec 12<sup>th</sup>

Wounds of the head, generally lacerated, treated as incised or as lacerated wounds of the other parts, remove all hair from the interior of the wound, not often require poultices - if the bone be chipped smooth it off or take it away, - Contused wounds require shaving the hair and suppuration - poultices and healing by granulations - If arteries are divided does not generally require ligature, Wounds of the eye Lids, require sutures of fine kind

Wounds of the throat - do not treat as on other parts of the body by closing &c or by keeping the head very much flexed by a bandage, or a stitch through the common integuments only, with bandages as may be required - if the Pharynx is deprived introduce a tube

Wounds of the Chest - treat on general principles - but to be closed as soon as possible

Tuesday -

Wounds of the JointsThursday Dec 15<sup>th</sup>

Surgical Wounds of the head - Often come inflammation of the brain either by some tissue as meninges or by contiguous inflammation - be guided of your Prognosis  
Of Fractures of the bone, now, Siphine unless the brain is injured, known by compression - Cut away the hair exposing the wound by separating the surface of the bone not cutting too much of the Percicanum Only as far as the bone is injured, then where you intend to apply the Tegplice remove the Percicanum and make a hole in the sound bone to be able to introduce the elevator and thereby remove the fractured part of the bone which may often be done without any Siphining - The Tegplice should extend as little over the fracture as possible - the Lenticals of no use - not always necessary to remove all the fractured parts where they may lie

Dr. W. Collaris Dec 16<sup>th</sup>

Injuries of Cholerating & Concussion of the Brain or as some say a contusion  
The simple Head, when there is only a dizziness and no fracture had usually happened.  
The more severe kinds, require great care; the pupil of the eye stationary, muscular system in action, pulse very quick, slow and tense, until reaction take place — usually compression take place — occasionally compression take place immediately after the symptoms of compression concussion and often difficult to decide which it may be — but compression known by dilated pupil and immovable muscles loose their action and easy pulse becomes slow, distinct of 40 Min or at a man dead, except — indeed often confounded with intoxication, here you had better wait a while — consequences from concussion inflammation of the brain & some for conception  
Treatment — bleed and do not allow the pulse to rise above the common standard or was not so high, cold applications, head raised, liver at rest — purging &c, if compression appears to come on, bleed largely, not allow him to be moved, Leeching, cupping, purging &c. Monday Dec 20<sup>th</sup>

Compression caused by a rupture of some large vessel, known by the symptom, not coming on for some time after the effect of concussion, and 1<sup>st</sup> When some of the fine vessels between bone and the Dura Mater or the plate, 2<sup>nd</sup> between the membranes — and 3<sup>rd</sup> In the substance of the brain Relief only can be afforded from the first of these causes — knowing the symptoms of compression come on some time after concussion, the locality of the collected blood is known by a great soreness of the place and the peri cranium detached over the part — and if the raising up the peri cranium is does not bleed — but all these symptoms do not often happen at the same time — compression sometimes takes place from collections of matter come on by tan your and fistulas and therefore bad comprehensions to be Treated by Antiphlogistics if it can be known as they are often of a Typhoid nature — depend more on external <sup>irritation</sup> ~~application~~, cupping — Leeching — perhaps Counteries or Moxa very good by exciting suppuration externally — no relief from an operation only when after cutting away the scalp you find the bone black and cut away the diseased bone — Of a Fungus growth from a blow, generally shooting out from the Dura Mater when there has been no fracture or when there have been and have been depressed or elevated, different opinions for the causes

Painful affection of some part of body Wednesday Dec 21<sup>st</sup>  
part of body ... shooting pain, from one part to another.

Hemicrania a common headache, not however the same as from arrangement of the stomach but from different causes arrangement of the hepatic system or derangements of the nervous system as in Hysteric sometimes come on as cold or a worm spot in the head - Treated generally by purgative and by nervous sedatives narcotic &c

Those resembling Rheumatism or even complicated with but of the same kind and caused by cold, accompanied by heat and fever tamefaction - &c

Neuralgia of the shooting kind, Sic Dolores on by the very worst form of

this disease and having <sup>a</sup> complete intermissions - Owing to various causes as primary diseases of the brain and here the eye is spasmotic and vision often effected and the mind is effected pain in other parts sometimes ear, tongue &c feet to wait while a see if the brain is effected - Remedies to be directed to the brain as bleeding, incision, local applications only to relieve if it be in the brain generally die by convulsions - These diseases of the complicated with Hemicrania &c

the next form is where it depends on an inflammation of the nerves and to be hardened - Caused by wounds, rheumatism, accompanied by great pain to the touch, sometimes great swelling of the part - generally only as redness, prostration of muscles of the part to which the nerves go being irritable and rigid - great pain in coughing and sneezing) - Requiring the Antiphlogistic remedies Other remedies for injuries - cups and leeches with ~~hematia~~ <sup>to stop bleeding</sup> bleeding, very low diet - blisters, lotions &c no much harm - After you subdue inflammation you may treat as may be required &c - Take care that this practice is not applied any other form of diseases -

There is another form where there is no inflammation, being a derangement of the nervous system, known by the state of the system, pulse generally weak, gapeous or soap bubble and will not bear pressure on the artery - the part is not intermittingly painful - cold, diminished sensibility, the intermission between the paroxysm are very complete - Medicines, Muriatic treatment the best with narcotics as Atarmonia and Belladonna - Treatment first correct the state of system, then such remedies as act on the nervous system as Ext.  $\frac{1}{4}$  Belladonna and Atarmonia of the Leeches gr  $\frac{1}{4}$  repeated 3 or 4 hours, Belladonna larger grs sometimes larger up to 30 or 40 with Calomel as generally presented Calomel grs 15 to 30 Ext. Bellad. gr 5ij - Discontinue the remedy when the guns become affected - Some resort to other tonics, as bark & iron &c or Quinine - The true Oxide of Iron should be fine heavy powders - that which we get in the shops is very impure, Pure bark of iron alone 20 or 30 grs &c

Wednesday Dec 21<sup>st</sup>

A seized tooth may cause Neuralgia, this does not so often happen as has been supposed - generally the nerve of the tooth is inflamed and has been painful a long time before the Neuralgic pain - if it be the tooth it must be extracted ~~also~~ also  
Foreign bodies <sup>lodged</sup> in the naturhood of the nerve, as shot for instance & litous heat by extracting the shot if this cannot be - bleed apply Moxa and cause suppuration and thereby you will often relieve the irritation - - - may also be caused by the pieces of Necroma bones - and different others &c

Thursday Dec 22<sup>nd</sup>

The Operation for dividing the nerves, "may be but of little use as the pain will generally return and only to be done in extreme cases, if it is done we ought to have a drain, - the branches of the fifth pair - Neuralgia often complicated with variety of different effects as Hemiplegia &c and therefore cannot be classed Nosologically -

Friday Dec 23<sup>rd</sup>

The Moxa for applying it, roll up the cotton in a long roll covered by linen so that a considerable quantity may be in a small space and sticked, this applied to the part by a pair of small forceps and fire set to the <sup>point</sup> of the Moxa directed by the common blow pipe - Some impregnate the Cotton by Nitre and then you will require a rag or paper with a hole cut through it and surround it so that the heat and sparks are confined to the part - the cotton is better when baked in a stone al next to a Tinder - It is said besides, the Caloric that evolved from the Moxa, electricity as is given to the nerves which sometimes is of importance, for this purpose it should be applied over the nerve & not over the nerve may be of use on the principle of Counter irritation - Aqua Ammonia to be used to relieve excessive pain but unless pain from the Moxa this very great - the Aqua Ammonia is not to be used, as after this suppuration will not follow so readily the end of the Moxa not against the skin is to light, but blow it through with the blow pipe - To be used in Hemiplegia, Hemiplegia, Neuralgia &c but it does not allay pain of inflammation of the nerves - to be used on the same principle as the red hot iron - It may be useful to see the organs of sense -

Diseases of the Ear, are very numerous, and very little attended to because we do not understand the principle of hearing - for sometimes the tympanum and bones are destroyed by ulceration and still there is hearing - the only one now believed is the vibratory or vibration of sound -

Lesions of the External Ear in Wounds stetch entirely through the substance - and not only through the thin skin only, and very careful in collecting sounds or air for vibrations - and for sympathy - (Look at Mr Swarts paper) - The Mucous Auditorius liable to many disease and the first is, it being clouded by a false membrane, if it be external may be cut away &c - if may be at the bony bottom near the tympani - or Dr W C thinks, it to be a thickening of the Mucous braini tympani - to cut it away is said to be dangerous, when the Tympani is thickened may be even opaque in a strong light - a strong Solution Lumar Caustic has been used with advantage by its eating and thinning it away -

Also a diminution of the size Meatus, even so that a probe cannot, perhaps be introduced - May depend on a determination of blood to the head - over come this and introduce small tents and allow them to remain, is the only Treatment - or even a little lumar Caustic diluted - but no very great benefit derived -

But more commonly obstructed by Wart, and Causes deafness common to old people from 60 to 80 years - to be extracted by probes and to be softened down by injections of warm Water and Milk - frequently the wart is in small quantities and not easily discovered, these are difficult to remove first moisten the part by some Animal Oil not vegetable Oil to remain an over night and syringe it out in the Morning with soft Soap and water a very small Silver wire to be used as a probe -

To relieve Hoarses of the Ear to be treated as Hoarses in other parts Common Sulphur at bed time - Warm tea all to produce perspiration - Locally, Solution of Coros Let gss to and 3 - Blue Ointment best is Nitrate of Silver - Castile Soap a very necessary part of the treatment - it require consider irritation in the neighborhood - A suppuration or Ulceration of the ear very troublesome throughout life - treat by Attentive with laxatives, a leton to the nape of the Neck - farinaceous - then Solution of the Nitrate of Silver, gr v to 2 to an Ounce and cleanse the ear with ~~Castile~~ Castile Soap as a wash -

Dr W. C. Leland Dec 27<sup>th</sup>

Polypos excrestines in the meatus auditorius follow a discharge of the ear - best an usque by applying balsal caustic

Diseases of the Tympanum and cells mastoidi - or middle ear - rarae  
is the inflammation of the living membrane of the Eustachian tube -  
and may obtrude in the obstruction of the passage to the throat - Cup-  
ping - Bleeding, leeches & low diet - Blister and emrocations do  
harm — From neglect you a collection of matter of a pu-  
lent kind - producing stenofaction because it cannot pass to  
the throat - (remains in the ear) to be evacuated immedi-  
ately nor to be left to nature - sometimes the bones will decay and be  
thrown off - to prevent this evacuate it by making an incision in  
the membrane of Tympanum, first ~~soothe~~ cleansing the ear  
by a syringe and taking out the hair, and then straightening the ear and the rays  
of the sun into the ear - or introduce a polished probe, then place  
stone at the inferior portion - thus subdue inflammation, apply over  
the ear a roasted onion, pungative, antiphlogistic - if a Blister at  
to the back of the neck - but a Leton on the neck of the neck  
is the very best of all remedies - (An Injet of Argentum Nitrate  
for the great feto of those you cannot cure - do not always  
terminate in suppuration - sometimes the Eustachian tubes are  
closed - is the often latte place from diseases of the throat -  
as the size of the aperture is either closed or pressed upon - occasion-  
ally the middle ear is cut off from the external ~~ear~~ atmosphere  
and here nothing will be of use but an operation which is  
seldom successful - The operation of Trephining the mastoid  
portion of the temporal bone - and exposing the middle ear to a  
the external air — Or introduce a probe through the nose  
but of very little use or none at all —

Diseases of the Labyrinths of Ear - pyramis of the side of the, ringing  
sound - but these are incurable - Or there may be a disease of  
the nerve auditorium - tonics as Iron bark, blisters, Moxa & deflection  
with salt, Zephante

Leagues may occur from some fevers than Mercury to be ad-  
ministered — Wednesday Dec 2 8th

Diseases of the Nose and throat — of the nose, from fever infections for ulcerations — also of the syphilitic form, Arsenic or Mercury as an alterative  $\frac{1}{2}$  gr for a dose not to salivate the patient or a sapon or an issue in the nostril hood of the neck or nose. or the mouth —

Ozena owing to scrofula — The decoction of the Woods or Lisbon diet with small doses of Corrosive Sublimate, Arachic as a wash, but of ale or oil of roasted cheese — but at last as little as possible as it only does harm —

A Thickening of the Living Membrane, might be mistaken for polypus — the same as a chronic inflammation, let it go on, there is no danger — active depletion, purgative, low diet, exciting perspiration — it is often on the lower spongy bone — difference from a polypus as it is firm to the bone and hard, little inflammation — A polypus moveable and varies its sizes and is soft, looks much like an oyster in appearance and is always on the external sides parieties of the nose, and may be extracted by the Polypus forceps but the bones not to be bruised or torn. or to be extracted by the wine, if too far back for the forceps, and to be taken out of the mouth and attach a sponge to a string fastened to the wine and taken out of the nose, and by pulling the sponge through the nose the polypus will follow or be easily taken out — sometimes you will not succeed, powder of blood root with white vitriol may cure it & as an ~~escharotic~~ escharotic 3 parts of blood root and one part white vitriol — Hypocuan of Potash said to have done great good — or other escharotics — to be used for up the nostrils — In malignant Polypi only palliate

Thursday Dec 2 9th

Diseases of the Tonsils, are of great variety — as inflammations with the surrounding mucous membrane more than any other part, as it is the cellular sub mucous cellular substance — they are not always in the

tonsils themselves — but often in ~~surrounding~~ ~~surrounding~~ circumstances situation treatment, active depletion, even to fainting; blisters and quarens do harm; — gauges often do injury — if any is used cold water only — when you wish to evacuate the pus do not cut through the hard part of the palate — they ought to be generally laid open but be careful in your examinations and operations —

Sometimes there is a Chronic Inflammation, caused by concretions and pieces of food, lodged in the riddle-like holes of the glands being compared to a pepper-box — then to be taken out by a probe

Ulcers — from scrofulous, syphilis, bad state of the stomach &c  
Correcting this compose the Treatment —

Cancerous — tonsil slightly enlarged, livid or lead-like colour extending down the throat, stiffness, shooting pains and varicose veins of the mucous membrane — nothing done by an Operation but, palliate milk diet, weak solution of corrosive subl. 3 grs to an 3 of water for a wash — Circumcisive never used —

Tonsils enlarged in Scrofulous; in children; known by moving very much at night, no pain unless inflammation is present, not an operation until it is too large, or you have failed in overcoming the scrofulous affection — if you operate, do it with the hook and knife and clip off a portion of it and let the cheese like substance pass out — in these operations <sup>and cause gagging</sup> pass the finger down

Enlarged Tonsils from frequently repeated inflammations, and sore throat — rarely to be cut out as hemorrhage will ensue but iron wire and double canula better than the silver wire, frequent by tightening it — or it being pinched tightly several hours, and may sometimes be taken off — it will generally pass of in 24 hours — is very painful — There is an enlargement from the use of Mercury because the

Mercury was of no use, not being of a very true care of  
really general disease — extracted by the wire — as above

Saturday Dec 31

### Ways of the Autum Haymonianus &c -

Tumors under the tongue, owing to the obstruction of the holes - lancing not sufficient or even probing - bat cut the tumor with a hook and cut off as much as you can with a pair of scissoes which the physician will supply - Let tons &c of little use as it will return - Generally in children the tumors often extend more below the chin than in the mouth - but do not lance it under the chin as it will leave a fistulous opening, be careful always to make the opening in the mouth - Called, Ramula (or soft Cancer)

Salivary Fistula, of the Parotid duct - Sets from the external orifice by a thread obliquely through into the mouth - this very difficult to cure, if this cannot be done you must destroy the functions of the Glands by pressure & Enlarged Sub Lingual Glands under tongue often interrupt articulation &c -

Monday Jan'y 2<sup>d</sup> 1826

Osteo Sarca, fleshy tumors growing from the bones or the bone being converted into a fleshy tumor, of two kinds one of the living Membrane the other of the Perios tissue it is generally found to be a Medullary tumor or a soft Cancer formed in the fibrous Membrane, it will always originate without inflammation there being no fluctuation; there is perhaps a constitutional disposition to this soft Cancer and all parts of the body is liable to it, And in operating for tumors we should be carefull whether it is of this kind or not - the eye chiefly the seat of this disease, and success more likely to follow the extirpation than when in any other situation, to be distinguished from Carsi Noma as they are much alike, at first looks like cataract afterwards a dark tumor arises containing a chalk like substance

Dr McClellan Tuesday January 3<sup>d</sup> 1826

Scirrho Cancer, common to the lower lip and the female breast  
in the lip he first feels a lump or seat which he often picks off after  
some time he feels a lancinating pain shooting and ulcerating  
pains external and internal - There are sometimes two or three  
tumors and an Icterus matter passes through an opening or bau  
deform excrescences, wisted edges - Small sinuses - it may  
wear the angle of the lower jaw - Seldom happen in any other  
situations than those mentioned - Sometimes the edges eveted at  
others inverted - the Venis, the os Uteri sometimes affected -  
the discharge never purulent but serous with little blood. Small  
very offensive small watery Icterus discharge - Sometimes in dis-  
-eases of the uis may be discharged - the internal part when cut  
open appears to be divided by <sup>by</sup> petitions known by the name of roots,  
at least 10 called <sup>to</sup> by the vulgar - the glands in the nabone hood  
secondarily irritated or inflamed - and a <sup>we</sup> hur may apprehend great  
danger from an operation unless you remove the glands, that  
is, the disease likely to return -

there many affections of the face; supposed to be cancerous but  
may have a suspicious appear but never result in true cancer  
unless it be in the lower lip - - sometimes extends like Phage -  
- denies ulcer &c but then are not cancerous - sometimes you a  
number of bluish spots which elevate and discharge their head  
up, these thought to be cancerous, happens on any part  
of the body - - but then are not cancerous.

The Scirrous and Medullary Cancer, of the fe-  
male breast - the true cancer never occur until  
after about 35 years of age, Many tumors do occur  
before this some also require to be extracted for  
safety &c there are a great variety of tumors at  
all ages these to be looked too, but not cancerous

They sometimes ulcerate and subside by suppuration —  
May be owing to some disease of the general system or Catarrh  
Treatment, alterative, laxatives, &c., as you prefer unless you wish  
to remove the breast by this mean — no irritating or stimulating  
applications to the part — but perhaps Lead water &c.  
Avoid every thing that may possibly prove injurious &c.  
If you cannot remove it any other way operate by taking  
out the diseased tumor only — Cut down to the tumor apply  
a hook and you will easily be get it out &c. but  
first give all the remedies a fair trial —

Breast Cancer, require different treatment, the constitution will  
be emaciated and hollow — the breast hard, retracted and sunk —  
Glands in the axilla enlarged — and always occurs in the decline  
of life — first cut away away the hair of the axilla — then cut  
from the lower portion obliquely to the axilla, then one above  
to correspond with the one below — then expose the pectoralis  
Major and remove the enlarged glands <sup>with the finger</sup> fine burrow under  
the gland and it is easily removed &c.  
To dress apply a salve, strips & bandage & scarcely any blood vessels re-  
quired to be tied unless profuse bleeding — then a ligature with  
a half knot ~~and soon to be taken off~~ the arm to be  
bound tight to the body — the patient to lie on the oppoite  
side or back &c.

Thursday January 5<sup>th</sup>

A Great <sup>number</sup> of Medullary and Scirrhus tumor, but all of the same  
one or the other of these two kinds and no other &c. — but are  
specific —

Operation for Cancer of the lip — wounds heal dif-  
fently in different countries as in Egypt they heal  
much sooner — if the system is able to bear  
the operation and surgeon can remove all the  
disease — he then is justifiable in performing  
the operation — & but where there is danger  
of death from other causes, never perform the  
operation &c.

Make a V-like incision and direct it down and extract  
the tumor and much of the parts as may be required &  
Carry the incision down to the angle of the jaw. &c  
And close it with the interrupted or twisted suture &c -  
If necessary a portion of the lower jaw may be removed.

Friday 6<sup>th</sup> January

In extracting the lower jaw - the Carotid artery is not to be tied  
previous to operating as recommended by some Surgeons &c.  
Cleft Lip; sometimes the jaw is divided more or less in one  
or two places — the bottom of bone to be pushed back  
to a level with the other teeth, & the edges to be pared away  
by a pair of Scissors, but not too obtuse above, to be  
carried up into the nose so that they may be drawn  
together with more neatness &c. But the cleft places  
the needles to be extracted in 48 hours or may be 3 hours,  
the needles before inserted before inserting them — the ends of  
the Suture to be left &c —

It perhaps best to use the interrupted Suture inside  
the lip and adhesive plaster on the outside, instead  
of the twisted Suture formerly recommended &c --

Saturday

or malignant or true cancer

Carcinoma of the eye; or Cancer of two kinds, all to be treat-  
ed in the same way, sometimes passing into the nose and other  
parts — the operations are all uncertain, little to be judged  
from an external examination, as sometimes the external parts  
are little affected and the internal parts may be very much af-  
fected — to extract the eye — introduce the bistury at the  
internal canthus and divide the nerves and muscles here,  
then by one incision above and one below and the eye is cut  
then introduce a <sup>small piece</sup> sponge and lay the lid over it and it will  
stop the hemorrhage and as the sponge is sent out, the part  
will be filled up by granulations

## Bronchotomy - Laryngotomy &c -

To relieve those who are ~~choaking~~ from foreign bodies in the glottis and suspending respiration - or, tumours in these parts causing the same obstruction or in spasmodic contraction from different causes - also from inflammations as Croup - (Croup of a true kind occurs only in children) Diphtheria Laryngitis, also require it - (this occurs in adults) Also may apply for Resuscitation - but first close the nose and prop upon the Ponsum Adami, and a pair of bellows introduced into the mouth and you may inflate the lungs this way - if this cannot succeed you may then perform the operation - where the parts are too much swollen do not perform the operation - but introduce catheter - Operation to be performed between the thyroid and cricoid Cartilages - Make a straight incision through the skin, and then dissect carefully down to the Crico-thyroid Cartilage - then a transverse or straight incision through the Cartilage straight when you wish to remove any foreign body - but if you wish to relieve then the transverse incision as then the tube will be easier introduced - some say hook of wire (of suspender spring wire) instead of the tube, thus best for children - Laryngotomy ought to be preferred &c

- Monday Jan'y 9<sup>th</sup> 1826 -

Introducing tubes in the Larynx through the nose pull out the tongue & pull the head forwards, the tube being curved but it is a difficult operation - Most frequently the foreign body is lodged in the Pharynx - very often may be taken out by the fingers of the operator in examining the part this should always be attempted before a probang is introduced, if you can only feel it with the end of the finger use a pair of forceps

Dr

McClellan

If however you do not succeed in this way you must throw the head back and introduce the probang, but this only when it is low down and after you have tried the effect of a pretty powerful emetic as this has often succeeded &c -

Introduction of a large catheter into the stomach to remove poisonous liquor or contents; the head to be thrown as far back as possible and the tube to be thrust down in a straight line aided by the finger, and then throw in warm water or water and milk. And then turn the patient over on the abdomen and the contents will be thrown out without any other effort - if not to be thrown out by the syringe - we may tickle the fauces and this may often succeed beyond all our expectations; this to be done before you introduce the stomach catheter.

Yesteray, May 16<sup>th</sup>

Tumors - Steatom-clots - Scar-hus, and Incised

The Steatom-clots or fatty tumours immediately under the skin insensible to touch, of a fatty feel - we must operate when they are so large as to be some inconvenient and can only be removed by aspiration, the whole part to be removed and not allow any part to remain - or it will return, the incision to be elliptical divide the integuments down to the tumour and use no other instruments than a scalpel and your fingers - like scrofulae

Cancerous, difficult to decide from an enlarged gland of the Lymphatics - known by the peculiar inflammation of the part about on the top of the sternum (like the common nodes)

Incised tumours - when they come to prove an incurable disease in the neck - often too confounded with bronchocles

Perhaps there are several sicks (of an interesting nature)

Wednesday Aug 10th

An Aneurism from many different causes as violence or a disease of the interior of the artery and these generally occur in the male between 35 to 50 years of age - first from dilatation of the artery and more likely to be in the Aorta - if very large you find a tumour of a pulsatory and will protrude near the sternum or between the ribs or they are absorbed by pressure - the ~~ext~~ parts between the cavity and the external parts are very much <sup>in coagulating blood</sup> thickened (A very interesting subject Pat present) bleed, rest - low diet &c  
all that can be done (unless an operation) but never coagulate in mere dilatation of the artery, most generally however the internal and middle coat rupture - known, by a thrilling or animal pulse also strong and hard - this also common to dilatations of heart &c

Great by - bleed every 3 or 4 days in small quantities from 6 to 10  $\frac{2}{3}$  - low diet of a thin vegetable & watery - laxatives nearly daily - rest absolute by sitting or lying down - this treatment to be continued a long time at a month or two or 4 or 5 months - and then gradually allow him to return to his former habits.

Thursday Aug 12th  
When the tumour extends <sup>the surface of mucous membrane</sup> towards the heart, the Aneurism bursts by coughing, if pressure could be applied it could be of service, but apply it over the ~~artery~~ artery between the tumour and the heart, sometimes there will be no pulsation owing to the granulations - An Operation, only an assistance to the remedies already mentioned - if it is performed better wait a while before it is performed - if the tumour becomes indolent it does not require an operation.

Aneurism of the Carotid Artery - The artery near the sternio mastoid - the Omo Hypoides crosses the artery - and here the incision is to be made and the ligature to be passed around by

a probe or needle the artery not be incised by passing handle of the knife under it.

Innominate — just above the sternum deep seated &c

Thursday & Friday

Of Aneurism of different other parts &c

Monday sunny

Aneurisms from wounds of the occident arteries from accident require to be cut down to the artery & apply a ligature above and below the tumour, the arteries will be found healthy and blood thrown into the cellular substance which forms the sac — More danger of mortification in ablations of this kind of Operations than in Cures of true Aneurisms because here the collateral branches are ready to convey the blood — You must therefore endeavour to keep up the circulation through the limb as much as possible — Aneurisms formed sometimes from fractures of the limb or strains &c and require to be cut down to and examined &c —

Amputations —

of the metatarsals of the Toes — which various causes will occasionally demand as tumors - necrosis &c of the part the metatarsal bone and phalanges are to be taken away two incisions one above and one below carried back to an acute angle disarticulate the joint and may be easily then <sup>be</sup> separated by the knife after this apply adhesive strips & arteries to be tied &c as may be required — no deformity but a narrowing of the foot &c

Of the foot — of the cure very much expedited by desiccating  
Leg with two bones upon flap of skin and a cushion of muscles — the cir-  
cular incision entirely around the limb (or the old plan)  
is the best — the bone to be taken off below the  
insertion of the ligaments of the patella. The tibia and  
Fibula to be divided exactly of the same length — the  
arteries then to be secured — no cellular substance, veins,  
nerves to be included in the ligature which is always  
the cause of so much pain and trouble — the soft  
parts brought together from side to side, leaving the liga-  
tures out at the lower end of the orifice — marrow sticks  
short — and light dressings, no tow — are no torqued but use a silk handerchief &c —

Of the thigh — for making the lateral flap — make an incision  
from the top of the bone to the bottom — one on each side  
of the bone, the incision slanting downwards is the  
best &c — of the circumstances which require an ampu-  
tation different questions arise — first Is an operation  
to be performed? — 2<sup>nd</sup> How? and is the whole limb  
to be taken off or only the affected part?

Ampputation occasionally required for — specific tumors — Phage-  
tic Ulcers — Compound Fractures and especially Com-  
pound Dislocations —

Dr Monday Mc Clellan  
January 23<sup>rd</sup> 1826

Hernia, dangerous the delay - every part of the contents  
of the abdomen may protrude in different regions -

Umbilical Hernia of the Infantile and that of Adults &c.

Infantile always a swelling in the centre of the umbilical chord  
some say always present in the Fetus in Utero - frequently seen  
at birth the Omentum ~~is~~ <sup>not</sup> yellow and is not protruded  
but different in adults where the omentum besides it is  
not exactly in the Umbilical but in the Lenia alba and  
the figure will be Oval - but in the Fetus it is an ~~a~~ circular  
one, and in adults the Omentum always present or per-  
haps may be of a fatty kind known to the French - no  
difficulty in reducing the Infantile Hernia seldom requiring an  
operation - but in

Adults there will be colic, indigestion and other trouble  
some symptoms from projections of the Omentum also  
there are less here when these fatty tumours are present as  
these are connected with the Omentum - these last  
more common to old corpulent persons - may happen  
to spare persons - the Omentum may generally be reduced  
by the fingers - but the fatty tumors more difficult to re-  
duce it - if it cannot be reduced must be supported by  
stays and belts, tapes &c the trip of Dr Helle  
is very preferable - but instruments as Trip be not to be used  
unless you have reduced the hernia - but use light pressure  
by belts or tapes &c and may be absorbed perhaps in this way

Tuesday January 24<sup>th</sup>

An Operation after recovering an Infantile Hernia & a double armed needle to be passed through the artery and both tied and an adhesion will take place or tie it up like the mouth of a sack Another way but either of these two modes seldom <sup>may</sup> require a see both of these may be done as there is noomentum in the neck ligature not so tight as to slough the part but only cause adhesions

Inguinal Hernia - generally enclosed in within the substance of the spermatic chord - the bands of muscles called collateral bands of Winnlow are the cause of stricture - the <sup>Female or</sup> Femoral Hernia differs in regard to their contents does not accompany the chord but lies on the thigh emerging there under Poupart's Ligament

Inguinal Hernia of different kinds from their state first when in the groin is called <sup>Bulbocele or</sup> Inguinal - when in the Scrotum called scrotal Hernia - The Hernia may be strangulated as soon as it passes through the upper ring and will be a small button like tumor has been called Concealed Inguinal Hernia - When there is a great deal of colic you should always enquire and examine in every Case - After a reduction of the Intestine you may have a Paroxysm of the Intestine and Salivation the only Cure - sometimes they continue the whole length of the chord and called an Oblique or Indirect Inguinal Hernia and here it has the spermatic artery behind it but when it passes down directly; the Artery will be before hind and in the last does not pass through both rings - but in the other ~~does not~~ passes through both the direct only through the external

upturing the fascia transversalis between the external ring and os pubis and then through the external ring called ventro-inguinal ring and is the direct Hernia the artery on the outside.  
the natural or oblique descent follows the spermatic chord which passes through both rings and the epigastric artery will be on the inside of the tunica and between the pubis, not so likely to be strangled.  
In the direct descent will pass over the Chord and cremaster and separating as in the indirect -

#### Inguinal Hernia

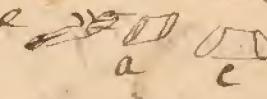
The Congenital occurs at birth and passes down into the Tunica vaginalis Testis which does not entirely surround it but behind it the intestine lies before the testis. (of the Tunica)  
The adult does not allow this - as the neck become in contact and close up the aperture by which the intestine testicle passed in.

Congenital Ing: Hernia sometimes the intestine has descended and the testicle has not descended another kind of Hernia and there frequently in after life the testicle endeavours to pass down and form strangulations.

The Incised Congenital Inguinal Hernia - Where the peritoneum passes down <sup>into the Tunica vaginalis</sup> before the ~~down~~ Intestine and one where the testes has passed down before - And where it has not passed ~~down~~

Thursday January 26th 1825

Contents of these Hernia of have little constricted parts independent of the true Constrictor ~~part~~ - May be constricted at the mouth of the cavity of the sack either at the neck or lower down or it may be above the real structure also and in this way the part of the sack which was at the abdominal ring and other constricted might return into the abdominal cavity.

• Of Femoral or Cervical Hernia — which passes out under  
Poupart's Ligament — sometimes the cellular substance is  
ruptured and then the sac is not so compact with the vesicle,  
and will <sup>not</sup> pass down the thigh — And best when the cellular  
substance is ~~not~~ ruptured it lie between the vesicles and the  
pubis and might be mistaken for Inguinal Hernia  
But if it is found down by the facia of the chord  
it will pass down the thigh — Femoral Hernia  
nearly always happens to the female, but Inguinal to the  
male — As the space under Poupart's Ligament is larger  
in the female on acc<sup>t</sup>. of the formation of the pelvis —  
It may also be distinguished by examination of the parts &c  
through which Cervical Hernia <sup>Inguinal Hernia</sup>  
Internal Cervical ring — and Internal abdominal ring And  
they are separated by Poupart's Ligaments — the Anterior  
part — the Hernia passing out under Poupart's ligament  
and facia lata of the thigh has a <sup>cervical</sup> edge  
and is the external ring of Femoral Hernias — the  
outer part of this aperture is filled up by vesicles — And  
there is a space <sup>or canal</sup> between those two Cervical rings And  
all these resemble the ~~Inguinal~~ abdominal rings and  
canal, but the two Cervical rings are much more ob-  
lique than the abdominal rings & canal 

~~W~~ H Clellan

Under the skin the first is a fascia of the abdomen sometimes thicker other times thinner this is not a true fascia but a dense cellular membrane — this covers the Lymphatic gland of the groins — Aneurism, بواس abcess, enlarged glands, Hernia, ulcers of the part; may easily be mistaken for each other these to be carefully distinguished — Anatomy of Inguinal Hernia — The fascia of the ext. Ob. form the external ab. Nominal and the chord passes through — When the Sartorius is at the abd. external ob. ring the bands of Winslow to be avoided — the internal ob. ring under the external ob. muscle also the int. ob. mus. and Trans. covers the upper part of the ring — the two ring generally the cause of stricture but the muscles over the rings may assist — the fascia transversalis lines the inside of the Tran. muscle and in this is the internal ring near the Spinous proceps — the Epegastric artery passes through the inner part of the ring and when the Hernia passes through this always carry the artery before it — if the Hernia be complete the stricture will almost always be at the external ring — Hernia of long standing the two rings meet and sometimes quite in contact — In Ventral Inguinal Hernia the Epegastric artery will be on the ~~inner~~ outside and here the Rectus muscle may cause the stricture, & Cremaster Mus. is given off from both parts ligament and meets the Chord in an angle just as it passes out and in the Oblique Reticular the Cremaster Mus. will be before the sack and according to this the Cremaster Mus. will be immediately under the External cellular fascia — the vessels will be on opposite sides of the sack — but will not divide the chord itself or the Cremaster Mus. from the chord in the Ventral Inguinal Hernia, but the chord may be before the sack

If any of the large Intestine <sup>come down</sup> &c the Peritoneum will not show  
a Hernia <sup>but may be behind the intestine</sup> Sack, — but in the small intestine there will be  
a loose sack covering the intestine being the Peritoneum

for inguinal Hernia Friday Jan 27 1826

Treatment, where no operation is required — the symptoms  
are colic pains indigestion &c and this will continue  
until it is reduced or pressure is removed & by this the  
blood will be congested, this may happen even when there  
is no strangulation — or a congestion of the alimentary mass  
in the small intestine protruded — the cause as generally  
a greater quantity of blood, wind or mucus forced into  
the sack and not stricture of the rings as generally  
thought to be — There is a irreducible Hernia  
which is not strangulated but where it cannot be  
reduced by the patient or Physician, this will generally  
be Coccyx &c but it may easily become strangulated  
and very liable to occur from local or generally irritation apt  
to occur in the right groin — there may be overcome by  
taking away the irritation by blood letting — injections, lax-  
atives & rest — an operation for this only palliative  
and only allows the Hernia to return — An Intestine  
known by the gurgling sound of water &c — If ~~the~~ Omentum  
known by the sensations of acoy and more solid — if the  
bladder be protruded known when the bladder is emp-  
ted — first know the nature of the Hernia and then  
will easily know how to reduce it — more easily done  
by bolstering at the shoulders and hips — shake the  
thigh and the patient to make no exertion whatever  
and slight pressure and the mode in accordance to  
the anatomy of the part — Femoral Hernia also redu-  
ced according to the kind of Hernia, if it rises above four

Treatment of Strangulated Hernia

- 1<sup>st</sup> the Taxis lightly
- 2<sup>nd</sup> Bleeding while sitting to fainting
- 3<sup>rd</sup> Laxative Enema
- 4<sup>th</sup> An Anodyne injection 60 gts to Feces
- 5 Tobacco injections have recommended
- 6<sup>th</sup> Application to the parts

Keeping at the same time the  
parts boltened up without  
any exertions on the part of the patient.

Keeping down inflammation & bleeding

downwards, then upwards,  
cathartics, laxatives, blood letting to syncope  
ury - ) - and this will be produ-  
cing or sitting - this the best  
this the best of all that can  
untill irritations of the  
time apply give Nausea  
- And apply cold wet cloths  
irritations - or put the  
a relaxed wet posture.  
ring must be attended to done  
and irritations ~~are~~ mortification may be induced.  
rium may be given when fear affect  
bacco has been used as an  
in the rectum but is apt to  
ed it be too great may pro-  
tect it may be of great use  
ed all this not succeed then  
do not wait longer than a  
the commencement of the  
g the Hernia some. Mechanism

Cal apparatus to a article as a sponge & bandage or Truss  
(or Hull) the very best - the fore pad of the Truss to be so  
placed as to cover both wings and the abdominal canal  
some soft old linen to be placed between the pad & skin to  
absorb the perspiration - all unnatural adhesions of the  
intestine, to be separated - also if two or more different  
substances lay down in the sack should adhere to each other  
they are carefully to be separated before it is returned.

If any of the large Intestines  
a Hernia <sup>but may be behind the</sup> ~~come down~~  
a loose sack covering the

<sup>for inguinal Hernia</sup>  
Treatment, where now as

are colic pains induced  
until it is reduced for if  
blood will be congested  
is no Strangury - or as  
in the small Intestines of  
ally a greater quantity of  
the sack and not the  
thought to be — The  
which is not strangulated  
reduced by the patient  
be Cæcum &c but it  
and very liable to occur for  
to occur in the right gro  
taking away the irritation  
atives & rest — An  
and only allows the Hernia  
Known by the gurgling so  
Known by the sensations.

Bladder be protruded Known when the bladder is emp-  
ted — first know the nature of the Hernia and then  
will easily know how to reduce it — more easily done  
by bolstering up the Shoulders and hips — shake the  
thigh and the patient to make no exertion whatever  
and slight pressure and the mode in accordance to  
the anatomy of the part — Femoral Hernia also redu-  
ced according to the kind of Hernia, if it rises above four

Schack  
adapted  
by  
afflax  
liative  
tincture  
cimentum  
the

parts ligament; prepare first downwards then upwards.  
if this will not do - depend on, <sup>cathartics</sup> laxatives, blood letting to provoke  
Cathartics of an active kind do injury - ) - And this will be produ-  
ced earlier by the patient standing or sitting - this the best  
if the patient can bear it - this the best of all that can  
be done and to be repeated until irritation of the  
parts is taken off - at the same time apply give Nause-  
ating dose of Amt. in water - and apply cold wet cloths  
to the parts or emollient fomentations - or put the  
patient in a warm bath in a relaxed ~~water~~ posture.  
If these do not do then the following <sup>must be attended to done</sup>  
so often using the taipis is wrong <sup>and irritations</sup> Mortification may be induced.  
It fever &c happens sometimes and Opium may be given when fear affects  
the patient too much — Tobacco has been used as an  
infection or by smoke thrown up the rectum but is apt to  
produce præstipation and should it be too great may pro-  
duce death — externally applied it may be of great use  
in Urinary diseases — Should all this not succeed then  
operate immediately at least do not wait longer than a  
day two or three at most after the commencement of the  
Strangury — After reducing the Hernia some mechanical  
apparatus to be applied as a compress & bandage or Truss  
(of Dr Hull) the very best — the four pads of the Truss to be so  
placed as to cover both rings and the abdominal canal  
some soft old linen to be placed between the pad & skin to  
absorb the perspiration — all unnatural adhesions of the  
intestine to be separated — also if two or more different  
substances lay down in the sack should adhere to each other  
they are carefully to be separated before it is returned.

Saturday January 28<sup>th</sup> 1826

The Operation for Lithotomy - the Lateral operation, as now practiced here - the staf large-knife instead of the Gorget.

Monday January 30<sup>th</sup>

The operation not so successful as might be wished for as one of 4 or 5 generally dies taking it in general.

Different periods of life has great effect in the success of the operation, for instance, more successful in youth or childhood, as then the incision will not be required to be so deep or long. More dangerous in after life than in the prime, as then in the decline the glanda will enlarge with many other circumstances.

Mode of operation has a great effect on the success - also the total situation and relative magnitude of the parts - as if the bladder is empty there will be no lower fundus - or also if the rectum is full it may be cut - if the bladder is distended by urine it will generally ~~will~~ be a more successful operation this not being so much danger.

Also the the fascia or suspensory ligament will be affected by the bladder being filled or empty - the vesicle artery & veins pass through the concretion of this fascia where it meets over the bladder and there is a danger of dividing these vessels and probably this may be the cause of the sudden death from the operation as they are often varicos and consequently the flow of blood is very great and all pressure is taken off the heart - & to prevent this the staf must not be too much curved.

The manner of conducting the gorget to be attended to be a sensible on a straight director the best - N.B. The muscle of the levator ani cover the prostate gland and some of the fibers to be cut in particular if not attended to the forceps cannot be introduced.

Dr. W<sup>r</sup>. C<sup>ll</sup>ellan

Monday January 31<sup>st</sup> 1826

The Sansomian Operation

By cutting immediately downwards to

the rectum on the staff; immediately between vesicular ducts  
but now is not much attended —

It has also been proposed to cut immediately upwards.  
No danger of cutting the vesicular b.<sup>s</sup> is to be but not  
no much attended to, being modifications of the low operation.

The High Operation; first named by Grance — formerly attributed  
to Cheseldon notwithstanding — they that is done off presented  
the discharge of the urine for 24 hours of which the  
Pentoneum was carried up and allowed room for the  
the incision — but then the urine will pass into the  
cavity of the abdomen will ulcerate the parts and often  
prove fatal — Cheseldon evacuated the urine and distended  
the bladder by barley water by this the danger greatly obviated  
— but here the coats of the bladder was paralysed by the great tension  
causing great difficulty and by the aspiration irritation ulceration  
suppuration sinuses follows — but he at last followed the low operation  
for reasons not known —

The High Operation as now Practised, is perhaps the best — and dif-  
fers in this, that the bladder is emptied by an artificial  
opening into the membranous portion of the rectum, ~~that~~ this  
was practised by Fayacome — but this not required — then intro-  
duce a <sup>containing a Bladget</sup> ~~canula~~ & he pumps the bladder up and of the peri-  
toneum with it and then extend the incision and take  
out the stone — and generally is attended by considerable  
success — but recommended by Dr. W<sup>r</sup>. C<sup>ll</sup>ellan without  
too sparing and without the canula containing a knife —  
See 3<sup>d</sup> page next

Monday Feby 13<sup>th</sup>

The Symptoms of Calculus — All the symptoms of Calculi may occur without any Calculi to be found —  
The symptoms — are Indigestion, flaccidity, acidity of the stomach  
the perspiration must be deranged — And to the derangement of  
the urinary organs. a smarting at the glands penis and the  
patient will pull at the prepuce and some say this is a  
sure sign of stone — or smarting or bloody urine also said  
a sure criterion — All these however are not certain —  
there is also a sudden stopping of the urine and even this  
might be fallacious, it might be closed by the 3<sup>rd</sup> lobe of  
the prostate gland or by a sudden spasm of the mus-  
cles of the urethra — An irritable condition of the rectum  
is also characteristic of this disease — pains shooting up in  
the side and abdomen all are as frequently present when  
there is no as when there is — being caused by a functional  
derangement of the nervous and other systems or a  
derangement of the bladder or urethra owing to an  
effection of the ~~bladder~~ stomach —

If from an irritability of the urethra from gonorrhœa — the  
same remedies for stricture of the canal and treated by  
occasionally introducing a Booge or introduce a strong  
injection of Lunar Caustic gr x to 3ij of water — Avoiding  
all stimulating diet and drinks — free exercise — &c  
Where it depends on derangement of the alimentary canal  
of 2 kinds One where the urine is loaded and at the same  
~~time~~ it is very offensive <sup>four</sup> — the other is red and not so  
offensive — the first to treated by mineral acids  
After cleansing the canal — The latter form  
to be treated an opposite plan — at the same time  
very low ~~and~~ diet occasionally bitters — The first to  
nitro's acid 3ʒ — Gum arab. sugar — and 3vj of water  
to be continued after there is relief to the disease

At the same time Alternatives - The first Condition  
is called The Lithic Acid State and the other  
the Alkaline — In these first the acids com-  
mence on the Kidneys — <sup>or Phosphate acids</sup> The Alkaline in all  
the living membrane of the urinary organs —  
The Stones are also of ~~one~~ to these two Kinds, but  
are connected with a derangement of Chylopoetic  
Viscera —

Tuesday Feby 14

The foregoing symptoms, are often the precursors of a  
Calculus in the Bladder and may last a number of years and  
they may even sometimes be removed by attention to Diet &c  
~~often~~ however none of this irritability of bladder will be  
found and the Calculi will form Impreceptable —  
and will always be of one of the two foregoing Kinds —

The Alkaline Kind the most difficult to treat by far  
The local affections of the Urinary & Lithic Acid, easier  
there being 3 Kinds as just above —

Hypochondriasis — very difficult to cure when the patient shall  
suppose he is affected with Calculi, and they will believe them  
Physician — this general and constitutional disease is a  
singular one — sometimes in one place then in another — The  
will eat well sleep well, but always complaining of something.  
Alternative and change of situation &c — (see Alkaline  
Kind) — sometimes chronic & acute — the urine is paler, is  
not caused by derangement of the stomach — & the  
skin altered and blotched &c —

Wednesday Feby 15

The introduction of the Catheter — required for ~~#~~ over retention  
of the urine — the only difficulty will be in the Perineum  
which will be spasm of the muscles of the part — use no force,  
until you relieve the spasm by other means — as blood letting  
until slight fainting — <sup>injunct</sup> injections & laxatives next as Castor Oil — wash-  
bath the best — And these will generally succeed — if these fail however then

give Opium iij to vjrs with as much Calomel the quantity of Opium to be large — the Ext of Belladonna prepared by some if it is good might be useful in 3 to 5 grs with Calomel — if you give too much you salivate — Last of all is Tobacco leaf 3ij to 1 pint an 3j injected occasionally — This Retention caused by Injuries of the Spine but seldom require so severe remedies — And is a Paralysis of the bladder — Occasionally you will not require any instruments — Silver Catheter generally the best in these cases but always have several different kinds of instruments and of different shapes — Large instruments pass easier than small ones —

High operation of Dr McClellan no instruments, but a scalpel forceps, forefinger & catheter, & thread of silk in a bowl of water below — In females a female catheter, these to remain after the operation for some time, and is very analogous to taking up the Iliac Artery — As now practised — 1st make an incision precisely in the direction of the fibers of the External oblique either higher or lower, above the Anterior process of the Ilium — after dividing the fibers — And those of the other muscles and expose the Peritoneum — Then use the fingers only and push up the Peritoneum and the artery will be seen, after you can apply the ligature by the needle & forceps of Dr Physick — Do not touch the artery with the finger or the handle of the knife or you must apply two ligatures and divide the artery nor pull the artery when you tie — the ligature passes out below the peritoneum

Dr. W. C. Bellan  
Tuesday Feby

Retention of the Urine by Spasmodic Stricture of the Urethra,  
caused by tumors in the Rectum - you worked &c

Real Stricture or Permanent Stricture - does not entirely prevent  
the flow of urine and may be always partially thrown out only  
when there shall be a spasmodic action and this again  
requires the alleviating measure - the other or former  
requires radical plan -

Palliatives - are such as shall divert away the blood from the  
parts by blood letting, laxatives, Clothing, diet, send your pa-  
tient to warm climate in winter as all change of  
weather affect this disease more than any other - such  
medicine and diet as cause a watery urine as vegetable  
diet - always deny all shortened, pastry, hot bread &c and  
even by these means you may expect much -

Small doses of Magn: a teaspoonful 3 times a day,  
next the alkalies every time water - (there however when  
the Phosphatic diathesis is not present) - all these  
used at the same time not too much exercise especially  
in summer - To these you may give Carol tea - parley  
- tea &c as adjuvant to cause a watery flow of urine -

If the Phosphatic diathesis is present - use the mineral  
acids - Muriat. Tinct of Iron - Barks &c might be given  
bathe the parts at rising - shower bath - After these use  
The Radical Remedies - excite an absorption of the mucous effus-  
ed in the Urethra - sometimes you have a bridle across  
the canal or sometimes you have warty tumors in  
different parts - And these will require cutting or burning -

A stricture at the ~~the~~ very anterior extremity of the Glandus  
penis - requires to be cut by a straight pointed bistoury -  
The most frequent situation of a stricture is at the very  
seat of Gonorrhœa viz about an inch back from  
the glandus penis — And requires a Catheter to be  
introduced every day or two and no particular kind  
of instrument to be used — It is at the bulb and  
at the membranous portion of the Utrachæ that re-  
quires a great care in the selection of the kind of the  
~~logie~~ — Those supposed by Dr Mc Clellan to be less  
frequent than generally by some practitioners think  
you may find an obstruction frequently and always  
attend to diet, laxatives &c for some time before  
decide on a stricture being there — especially if <sup>you</sup> shall  
have already passed a stricture, and in those cases  
it might be spasmodic occasionally — Wax logie  
or flexible catheters here often prove useful — you  
may do more harm with a metallic tube if  
do not understand the anatomy of the parts well —  
the gum elastic catheters are always to be kept bent —  
the wax logie will show you the size and situation of the  
stricture — Oils to lubricate the logie should be animal  
as Lard &c — Do not use too small metallic instru-  
ments as they will bend too much — the moment  
all irritation from the introduction of one to logie  
is the proper time for the introduction of another  
time — these with oil &c — will generally  
be sufficient — although in some cases the patient will  
complain much from the first few introductions —

It sometimes happens however that the most violent (as some say) that we must use a ~~cold~~ caudle containing a knife, this may sometimes do, but generally it is better to introduce a catheter and allow it to remain several days at a time confining them at the same time bed and the other requisite mentioned before — the caustic only good for destroying the morbid irritability and used the lunar Caustic in <sup>10 to 40 grs to 3</sup> j. never use it to burn out the stricture as practiced by some — not much advantage from blisters &c cold & warm bathings might be of use, used according circumstance —

Retention of Urine in Old persons is generally caused by a disease of the prostate gland and they will prevent the entrance of the large Catheter — the enlargement of the 3<sup>rd</sup> lobe is generally the cause — the ordinary instrument can only be introduced by bending it very much and pass over it — sometimes one or other of the lateral glands and then the instruments bent accordingly — Friday Feby 17<sup>th</sup>

Diseases of the Testicle — are first a vicarous enlargement of the Spermatic veins — producing tumors in the posterior portion of the testicle also rising higher up — giving some dull pain for hours — owing to too great quantity of blood in the part and is always in the left side — is very common only walk the part every morning <sup>cold water</sup> or <sup>or softer</sup> support the parts by bags or tight drawers — a very simple disease feels like a map of worms — and you may see the Blue vein. dont drink much wine nor dont eat much

The next in frequency is enlargement from an injury -

~~complete~~ - bleed purgatives of Heyalagoge kind - keep him on his back & complicated abscesses - serofulous enlargements and ulcerations require nothing but the plan of treatment for Scrofula.

Chronic Tremor - in different situations but all of no dangerous kind - only are a trifle weak & never result from harm - order diet Bluehill, Sarsaparilla friction - suspension a bogby light & is generally sufficient next Hernia Humeralis -

If that which arises from Gonorrhœa - to be treated as if it had arose from any other cause - If the pains be very severe - Bleed - leeches - laxatives - low diet, patient on his back - a large emollient poultice the very best. Sometimes they will return again & again then smear the testicle with Mercurial Oint: Camph: Worms powder 6 to 10 grs with 3 or 4 grs Calomel at night - Sometimes the epididymus will always remain larger than common -

Sarco Celle require a regular course of boguing and always attend to the connection between the Uterus & serotum as smearing the body with mercurial Ointment

Cancerous - Tumors or an increase of a sarcomatous tumor are always to be cut off as it may be of a malignant nature where two specific diseases are the only ones that demand <sup>extirpation!</sup>

Hydro-Celle - of common Anasarca Hydrocele - and is only in the skin - if easily managed if not connected with common dropsy nature generally cures it shower bath & tonics may assist - douches purgatives &c

Genuine Hydrocele - is in the cavity of Tunica vaginalis there are various ~~as~~ as there are several socks sometimes connected and all these must be opened and the are called tunical Hydrocele - make an incision and expect urine water and allow it to remain sometimes then take it out this will only answer for simple simple Hydrocele

Dr McClellan

For if there be Hydatides or a number of Sacks requiring a large opening ~~as~~ but only tapping with a lancet sometimes produce great inflammation consequently the above plan will be hazardous — The best is by making an incision and introducing a bovie or spay a deton through the rectum — Instead of this Dr McClellan introduced a piece of linen rag and allowed it to remain drawing it out gradually.   
The Deton is perhaps the best — introducing it at the lower part and carry it out at the upper part & tie together the two ends of the strings — this may be passed through all the sacks & And use blanda gels —

Tuesday Feby 1<sup>st</sup>

Tapping the Bladder — Where it cannot be done by the Ureters it is to be done below and above as recommended for Lithotomy. When the third lobe is enormously enlarged, I would prefer the bladder above the pubis and introduce a trochar and wire in for two or 3 days and then introduce a short canula.

Performing it, through the rectum is more difficult

Diseases of the Rectum — Hemorrhoids of 2 kinds Basilar & Muscular — The former caused by constancy &c and the last not from the same cause —

Treatment in the Basilar by laxatives diet low, Cold ablution several times a day is the very best —

The Muscular tumors sometimes become very large even that they cannot be reduced into the rectum — they must be extirpated by ligatures or by the knife and not often much hemorrhage less ample than generally supposed, as they are to be drawn out and then to be cut off

A frequent disease is the rectum becoming dilated and the upper part falls down into it - and the stools will be long and difficult and all the sensations of stricture will be felt - the only cure is laxatives, diet - laxatives, as Sulphur &c - and above all the hourly use of injections of Cold water or other cold -

There may be a scirrhoucity of the rectum in old age causing strictures & requires laxatives - like mush & molasses, Stewed prunes - if Cancerous, cicuta injections and an introduction of a bogue -

Fistula in Ano - and abscesses probably always caused by many or all of the diseases just before mentioned - And Fistulas are of a great variety and no treatment will be of use, until you first reduce the cause - as strictures in the anus are a fish bone or any foreign body might pass out and cause the disease - or it may be caused by an affection of the Constitution and inflammation extending and causing the disease -

We have abscesses of this kind from debilitated Constitution or from that state of the constitution which cause or have Phthisis, Asthma, gout, Rheumatism. When some say we ought not to operate under such circumstances and again recommend operating under every circumstance or constitutional disease - This subject is involved in great difficulty -

If however the fistula cause irritation or anything else disagreeable then cure it and form an issue in some place if required -

Still if it be Chronic and there be a tendency to Phthisis &c and the fistula is not inconvenient then do not operate for the disease act at an issue would much better be left alone - {also caused by Phlegmonous myxipitas}

Different varieties of Fistula as where there is no external opening Called Blind Fistula - And here <sup>they</sup> will extravasate in the loose cellular substance causing great pain, a horrid consequence may be follow'd (as related) if not timely opened - You may find the fluctuation in the abscess before any opening is formed then open and you cure the disease -

Where the Opening is External, and may maybe cured if the opening be freely opened in time and will not require the operation for Fistula - Still however we have often abscesses extending high up and is called an incomplete Fistula - they are very difficult to cure and require a full operation and here the sharp pointed bistoury must be used - after the operation put a small quantity of dry lint between the lips repeated every day.

Superficial Fistula. often extend to receive a Seminalis and cause such great desire for a venereal appetite only to be relieved by an operation for the fistula -

The patient should live on a low diet altogether on the disease always will return -

Saturday Feby 18<sup>th</sup>

Abscess often or at least may happen in the cavity of the Rectum and the bladder will appear floating in the pus of the abscess - this sometimes breaks in the abdomen corroding the Peritoneum and intestines - Very Purulent abscesses often happen in the abdomen

Monday Feby 20<sup>th</sup>

Nephritic Inflammation - Affectionous bleed - hip bath - Opium & aperient - enema mild laxatives - Opt Tincture 8 gts &c

Wounds of the Eye — Foreign bodies in the eye — to be removed  
(if they be steel, glass &c) by producing a contraction of the pupil & keep  
the other eye open and look obliquely and you will see it lying in a  
little pit and then remove it by a large curved needle with the  
side of the needle — if however it has met you must intro-  
duce the point of the instrument in under the foreign body, but  
can then easily remove it — you must therefore distinguish  
the manner the foreign body was inserted — and then act as above —

If you do not extract it — do not bleed & give laxatives &c as recom-  
mended as it will exasperate inflammation — but treat it with the  
juice of Sassafras — Whether you extract or no keep the eye cool  
from light and the use of the juice of sassafras —

Small hairs, growing into the eye produce frequently the inflammations of the  
eye and these you may relief by extracting these hairs — generally  
found on the external Canthus of the eye —

Watery Excrements — in the parts, produce great irritation, then to be cut  
out and touched with lunar Caustic, also Watry excrements  
do not allow the lunar caustic over the whole eye, and then use the  
juice of Sassafras before closing the eye —

Thickening of the caruncula lacrimalis — or the parts having hairs growing  
out — and keep up inflammation — laxatives, removing the hairs  
if this does not do remove a part of the Caruncula —

Gidditudo or destruction of the root of the eye lashes — as not use any  
whiskers — unless Milk & Water — depend upon Blue Pill say night  
and a Detox in the back of the neck week — and always attend to this

Obstructions of the lacrimal duct — or tumors of the parts, the parts  
to be cut open and introduce the point of lunar Caustic, or cut it out  
entirely if you do it on the external surface, sometimes they will go away  
by Laxatives or sedately powder & vegetable diet — or Champhorated  
ointment — or use dried gall bladder diluted with vinegar to the consist-  
ence of ~~mucus~~ every morning going to bed — Never use leeches in the  
eye lids only leech the temples —

Obstructions of the lacrimal duct — blisters, bloodletting Sulphur  
gum to 3d water — laxatives — Alteratives — Pain in the eye from reading  
depends on — alteratives — changes of habit — depends not on local applica-

cannot see it.  
If the day is dark and the body is near the pupil you

Dr. McCollan.  
Monday Feby 20<sup>th</sup>

Here are Inflammation of the external part of the bow unctiva  
Infants often happen a few days or weeks after birth - and then  
are very similar to Gonorrhœal inflammation, and there might be  
contracted by passing through the pelvis - And do affect some  
females having Gonorrhœa or Fluor atbus - this disease  
will suppurate & are very severe - are to be treated alike.  
Never apply leeches or lead water - but apply Stimulants as  
Linct. of Camphor not to be allowed to pass between the lids - also  
fomenting the eyes three or four times a half an hour with  
milk & water then apply the Camphor at the same  
time the following may be used with advantage -

grj Sulph Zinc grj Lead water Rose 3ij - Also Sulphate  
of Copper grs to 3j water - Solution of lunar Caustic sufficient  
to change the colour of the water & may be strengthened - these  
also good for the efflorescent parts of the conjunctiva from Gonor-  
rhœa matter being carried to the eye, and here the lunar Caustic  
the only remedy - in children give Mag: - blister on the neck or  
temple - this disease in suppuration will lay open the Cornea  
and an opacity will follow - lead water will always produce  
an opacity as the lead is decomposed -

Infectious Ophthalmia. - Common and often found in Thieves  
It is suppurative & a peculiar disposition to form watery excres-  
-ces on the eye or the lining of the lids - and the disease is kept  
up by warts which are to be cut off and are lunar Caustic - by  
writing with a camel hair pencil it produces inflammation and pro-  
duces a new action - also setons - if inflammation runs too  
high use Cola application

Scrofulous Ophthalmia - the most frequent of all diseases of the eye  
you will find other symptoms present of Scrofula - abdominal tumid  
stools black - the eye will be very irritable and relieved by low  
diet &c - you will see small pimplies and ulcers on the conjunc-  
tiva - sometimes the ulcers are very deep - to treat by Altringer  
and purgatives and this the only plan

or Blue Pill or Corrosive <sup>but</sup> on the alternative  
turn & manna the last -

the Sarsaparilla after 2 or 3 weeks - given in Tea -

friction with the ~~hot~~ towel and salt - every morning -  
farinaceous diet -

If there do not do use next the seton -

Emetics occasionally Specae or Ant.

Watery solution of Opium 8 or 10 grs to 3 fl - Copper Zinc  
bark with of Sassafras - first burn Caustic to the ulcer  
if the skin blisters or pretenses do not cut or pull it back - but  
apply the bark of Sassafras and apply common Caustic every day and  
thoroughly destroy - Use belladonna to keep open the corner

Tuesday Feby 21st

General Inflammation or pain from sewing or reading being  
an irritability are to be treated by change of air & altera-  
tives &c diet - Antiphlogistic and general plasters now  
used by bleeding & warm bath -

Where Coughing and pain come on suddenly and they  
lose their sight immediately - depend on an in-  
flammation ~~not~~ within the eye and a no redness exten-  
sively - Blood letting to the greatest extent - Antiphlo-  
gistic - cupping &c as before - local application  
to either cold or warm as comfort shall be given.  
~~use~~ pledges of linen in water renewed as often as  
they are dry - to be placed over all the surrounding  
parts - poultices never to remain on too long

McClellan Feb 21<sup>st</sup>

The alarm and punctice only when there is a relaxed state of the conjunctiva — It may do good in serofulous and edematous Inflammation to remove them for a night then use Stimulants - as Camphor.

Inflammations of the ball and deep seated - which does not affect the external parts sometimes from cold collected in other parts and the general symptoms of Rheumatism as the tongue white fur mouth - stomach & bowels regular - pulse irritated hard tense & luminous &c — the appearance of the eye itself will assist you — the inflammation confined to the sclerotica / Iris & lens - the pupil immovable - the vessels of the sclerotica run in straight lines and not vermicular as in ~~other parts~~ of the conjunctiva - these vessels run to and in the cornea itself - It terminates in adhesive inflammation of the Iris - you will see small particles of pus - the pupil has attracted adhesion and cannot be dilated - sometimes extends to the choroid coat - retina &c

Treated as Rheumatism by bleeding largely and rapidly leech the temple - then evacuate the bowels - Blister, fomentation warm applications - endeavour to determine to the skin as in Rheumatism — then Opium — the vinous Gallicum 60 gts with magnesia is the very best remedy several times a day - and will always relieve general Rheumatism of the joints

Ophthalmia of the Scaly Disease - as of the Scaly, Phagadenic &c — is very similar to the former Ophthalmia — not certain whether from the disease or from the remedies — It occurs where no Mercury has been used — A disease similar to this from long Mercurial Course — and probably ~~&~~ contracted from cold — but this cannot be treated as the <sup>tic</sup> symptomatic kind as bleeding & evacuants as they always do harm — The best plan is to place the patient on the rapid use of Mercury — with ~~the~~ Belladonna & Stramonium to dilate the pupil — and then are the two great remedies — and every thing else is only assistance — if fever bleed — &c — Haemating remedies always affect the effects of mercurial very much — give belladonna with antimony and you may do it in several days — Of Cal: grisej. and Powder grisej every 4 hours — Cup the temples — letons behind the neck &c.

- Cup the temples - letons behind the neck &c  
you will generally remove the disease in 4 or 5 weeks.  
Continue the Bismuthum for several months.

Cicatrix of the Cornea - caused by various causes - common to  
old persons from no cause whatever - to be treated according  
to the cause — It has ~~not~~ happened in young persons from  
no cause whatever where it takes an opaque action -  
There is another where it is caused by Ulceration and may be  
removed although you cannot remove the Cicatrix - which  
in a majority of cases happens — Sometimes a cataract-  
lousy or Hydro happen from inflammation or injuries &c  
The Treatment - by such means as will effect an absorption  
of the opacity - if it has been of short duration you may  
still have greater hope - if it has been of long stand-  
ing you can have but little hope to work at all.

it

You may try it, have existed several months or even two years &c — (you will remove this deposition of lymph by stimulants &c as some say) (diminishing the circulation as may be proper to do by bleeding, leeching, purging, letdowns &c and have all done good) the best is to move in the intermediate & any one as may be required — for instance if there be infarct redness and the reflex are large reject the first plan, but act by the second plan when to divide the reflexes — draw blood to diminish the vis a tergo — blister, leech, letdowns on the back of the neck — this do for a month or two then divide the reflexes — first elevated a portion of the conjunctiva by a small hook and cut it all off by the scissor — do not cut down by a knife as some do — as you will only partially divide the reflex — but you may run the knife under the reflex and cut a large sacrifice so that you do not have an eczema. The scarification knife may be of use to scratch on the inside of the lid — alternatives — low diet of Purging, bleeding &c particularly alternatives if there be scrofulous — The Opacity augments or sometimes is kept up by the Iris adhesion to the Cornea, and then cut off the supply of blood by introducing a curved needle — this circumstance not at all attended by physicians generally — always take care to establish the healthy functions of the skin —

Where there is no surrounding vascularity but opacity then stimulants slight fomentation — friction — change of diet — purges &c — also ~~the~~ the astringents may do good locally more or specific — Sulph Zinc grs to 3<sup>4</sup> water corrosive sub. gr 1/4 to copper &c

If the eyes are aggrieved in the morning use lotion  
Oint. Zi Lard Zi to anoint the eye on going to bed.  
And an Altringer in the day

Venigium - A membranous growth or fungous ~~scar~~ <sup>canthus</sup>, may  
at the inner margin of the eye ~~caduc~~ <sup>caduc</sup> by the junction  
of the two lids on the eye - and a vascularization of irid-  
ation of this is the disease - hook it up and cut it  
away and you have a cure with Antiphlogistic and col-  
liriate - If it be a true venigium where the vessels  
are running together without this map then cut them  
out by a hook and knife or by a cataract knife -  
but do not cut away too much of the substance or  
you cut the Cannula lacrimalis &c -

Operation for Making the Artificial Pupil - are there  
are three different kinds, - 1st Where there is  
a small pupil - introduce a small knife  
(as recommended by Cheseidou) through behind the Cornea

2d the operation of Scapha - the iris is torn off and pushed  
away -

3 - Introduce a hook ~~and~~ through the cornea and hook up  
the Iris and cut it off and allow the remainder to  
retract - the operation of Wendyell -

Which of these operations to be performed -

If the crystalline lens are sound do not interfere  
with the lens - Do not do it by Cheseidou - and his  
only in Chataze -

If the interior of the eye is sound then the last  
operation for an opacity of the cornea,

Dr H. C. Blackman

Tuesday Feby 21<sup>st</sup>

Hence the patient will only see obliquely, you  
may and may & relieve of by Stramoniun.

But the best of all is an operation especially when  
a pax of small pox shall happen in the center of the  
Cornea - also from Wounds - the pupil will dilate  
and the Iris will be sound - there may be at the  
same an opacity of the lens -

Make a puncture near the edge of the Cornea by a  
knife sufficient to introduce your hook into the pupil  
through the anterior chamber - then pull the  
hook out and Iris with it and cut it off by a pair  
of curved sissors - And push the rest back - this  
is the last operation -

The Operation of Stapha — All the Cornea but a margin  
of it is left opaque — introduce the needle behind  
the Iris and ~~a tear~~ it away — perhaps even the 3<sup>rd</sup>  
operation is the best — and is a dangerous operation.  
And the disease will return — or perhaps even total blindness  
will might follow —

Thursday Feby 23<sup>rd</sup>

Dilatation of the Pupil of which the best is - with a corneal  
knife - about a margin of the Iris obliquely through the cornea  
make a puncture large enough to carry a hook through  
avoid the hook touching the Cornea and lens - seize the  
margin of the Iris and draw it out a small fold  
of it - and cut out as much as may be required, then  
there will be no danger of it closing again by inflam-

Icarpa's operation does more violence to the eye and apt  
not to be successful -- it is done by tearing away  
the Iris from the ciliary - only where, the whole of  
the Cornea is opaque but a small portion of the margin  
only remaining, is this to be done -

To remove an opaque large cornea - from great inflammation  
- Introduce a cornea knife in the Cornea - then with  
hook <sup>you</sup> take the Cornea - then with a knife cut it off  
and may do it without injuring the eye - and is  
the easiest way of performing the operation -

Cataract - of different kinds - At couching - by intro-  
ducing a needle behind the pupil and sink the lens  
hard lenses cannot be operated on in this, but in all  
cases it is a bad plan -

Extraction - <sup>called division</sup> not to be pursued in all cases, best in  
hard cataract such as happens in old persons  
Introduce a knife in the cornea and cut it half  
through in the form of a flap and to be carried by  
a hook and moved in different directions, will ~~not~~ do only  
for a hard cataract <sup>as it is so supine</sup>.  
Add one division the lens in halves and then divided  
and broken in fragments and thrown into the ante-  
rior chamber of the eye - can only be performed  
where the Cataract is soft - is the most difficult -  
this is the the operation for a soft or membranous cat-  
aract - and then use the double edged knife for soft  
cataract - a needle for a membranous cataract;  
this operation called Division -

Dr. H<sup>r</sup> Bellan Feby 23<sup>rd</sup>

called lacerating  
Scudering the Posterior & Anterior - passed through the  
Cornea, not at the edge for fear of the Iris Cornea Iris, And  
is carried through the pupil, And you desire to ad-  
mit the lens to the vitrious humour and the  
lens will be wasted away

Posterior more dangerous and inj' lamination more likely  
to follow -

Friday Feby 24<sup>th</sup>

Of Different Cataract - and the operations to adapted to the  
different kinds - - Cataract differ on account of the cause,  
that produce them. And the age of the individuals -  
In youth they are soft - in old age hard -

Recent Cataract from wounds often mem branosus -  
The Chronic or slow kind in old age it will be hard.  
And here the crystalline lens is the seat of the disease  
especially if he see better in a dark day &c

If this kind happen to children we know them to be  
soft - there are better principles than exam  
the appearances of the eye themselves -

The Membranous Cataract is situated in the anterior  
portion of the capsules of the lens - and in this situation  
most of the diseases of the eye happen especially if the  
patient be not in the decline of life - scared from  
wounds - Ulcers on the Cornea, or small pox - or from causes  
that cannot be explained - there may be an affection and  
still the lens are not all diseased here you will see very  
whitish spots

Besides the Silvery, there are some muddier — and here  
the lens may or may not be affected — But those from  
Wounds, & scrofula, the lens will be soft or entirely opaque,  
disorganized and absorbed — Called Cuticular Cataract  
soft — From Wounds the Posterior Chamber advances  
itself into the Anterior — We have also the Membra-  
nous Cataract in the form of  
Scrophularian cataract are scrophulous — always operate  
immediately and do not leave the patient to grow up.  
as the capsule will become cloudy &c — We sometimes  
have found this kind of Cataract to come on in a man aged  
as at 14 to 20 or more than connected with Scrophulous  
diathesis — Common to cooks over a hot fire a long time  
— a Sea Captain who looks a long time through a Telescope  
or Smiths &c often has something of this kind or hard  
er — Then we prefer Salvia or sanguinaria or yarrow  
night extract — And is called the  
Soft Cataract and is intermediate between the hard  
and the membranous cataract — You may know  
if the lens is present by it being the Iris being convex  
& all these things to be attended

The Hard or Organized Cataract — peculiar to old subjects  
beyond 40 or 50 years of age — they come on without  
any disease or cause and cannot be checked by  
any means we know of — sometimes becomes ossified  
we seldom have any other disease with it — No treat-  
ment will be of any use — unless indicated by some  
peculiarity or pain heat &c in the neighbourhood

Do not operate until the cataract is complete

The capsule is perfect - but is to be cut frequently - if not  
the threads of capsule remaining will become opaque  
and then they must be drawn away - often how-  
ever they will be of an ash colour -

Of capsular cataract or the posterior capsule of the  
cataract - can be seen easily behind the crystalline  
lens far back - it is very thin - you must only ex-  
- pect to see a dark hazy appearance far back -

It is generally in combination with Amaurosis -  
therefore the prospect of relief from an operation is  
rare - notwithstanding you destroy the posterior  
capsule - And by the operation you mostly will  
destroy the lens - best cut away all the posterior  
lens - and anterior also and at the same time de-  
stroy the lens --- Always begin first & carefully  
boldly - & steadily and use Saunders curved  
needle.

Saturday Takey -

Amaurosis - of two kinds, Functional and organic

Functional - where there is a great congestion of blood  
to the neighbouring parts known by heat of  
the forehead, flushed countenance & and may  
be cured by antiphlogistic - cupping - general bleeding  
seton in the back of the neck, low diet & also alteratives,

Oliganic Anamrosis - Can never or seldom ever be  
cured, it generally occurs in old persons, and it  
seems useless to attempt any remedy - alternatives  
and a variety of other plans have proved un-  
availing, But we are not entirely to despair  
as we have known cures from this form  
of the disease &c —